

Claim Form (CPR Part 8)

In the	
Claim no.	
Fee Account no.	

Claimant					SEA	
Defendant(s	s)					
	laim include any iss aim (see also overleaf)	ues under the Huma	an Rig	hts Act 1998?	Yes	□No
Defendant's name and nddress				Court fee Legal representat Issue date	ive's costs	£

For further details of the courts www.gov.uk/find-court-tribunal.

When corresponding with the Court, please address forms or letters to the Manager and always quote the claim number.

	Claim no.				
Details of claim (continued)					
*(I believe)(The Claimant believes) that the facts stated in these particulars of claim are true. * I am duly authorised by the claimant to sign this statement. Full name					
Name of claimant's legal representative's firm					
*(Claimant)(Litigation friend) (Legal representative's solicitor)	position or office held(if signing on behalf of firm or company) *delete as appropriate				
	Claimant's or claimant's legal representative's address to which documents should be sent if different from overleaf. If you are prepared to accept service by DX, fax or e-mail, please add details.				